

Chicago Travel Tracker Survey
Recruitment Interview

Notes:

- Items in ALL CAPS are programmer/interviewer notes or response codes that are not read to the respondent.
- Items appearing in caps with brackets such as [AGENCY] denote merge fields where the actual information to be read may vary across respondents or other special programming notes.
- Items in upper and lower case (unless otherwise noted) are read to the respondent verbatim.
- The numbering of the choice sets may sometimes not be continuous. This is because we use standard codes for response categories of "other – specify", don't know, and refused.
- The completed recruitment interviews will be tracked by the same categories as identified for retrieval, with goals set assuming 70% of each respondent type will complete the retrieval process.

INTRODUCTION

Hi –I'm calling on behalf of CMAP, the Chicago Metropolitan Agency for Planning. We're putting together a new plan for guiding future growth and transportation investment in the greater Chicago region. As part of this plan, we're reaching out to residents of [MUNICIPALITY/COUNTY] to participate in our "Travel Tracker" survey of your daily transportation habits. Sharing this information helps us plan future transportation improvements that will best serve your needs.

May I speak with [NAME – IF LISTED SAMPLE] / [an adult in the house – IF UNLISTED SAMPLE]?

ADULT ON PHONE: The data collected through this survey will be used to identify and prioritize future transportation needs. Your participation is voluntary, and your answers will be completely confidential. Please answer as many questions as you are able.

Screener Questions – asked of everyone

S1. Have I reached you on a cell phone? (Yes/No – If Yes, is there a different number where you'd rather I reach you?)

S2. [IF ADVLET=9] Do you remember receiving a letter about this study?

- 1 YES
- 2 NO
- 9 DK/RF

S3 And my records show that you live in [COUNTY] county. Is this correct?

- 1 YES
- 1 NO
- 9 DK/RF

S4 IF NO TO S3: In which county do you live?

- 1 COOK
- 2 DUPAGE
- 3 GRUNDY
- 4 KANE
- 5 KENDALL
- 6 LAKE
- 7 MCHENRY
- 8 WILL
- 97 OTHER (SPECIFY) --> TERMINATE AS OUT OF AREA
- 98 DON'T KNOW --> TERMINATE
- 99 REFUSED --> TERMINATE

S5 Does anyone in your household ride the bus or train at least once a week?

- 1 YES
- 2 NO
- 9 DK/RF

S6 Does anyone in your household walk or bike to work or school at least once a week?

- 1 YES
- 2 NO
- 9 DK/RF

S6a And what is your race?

- 1 White → TERMINATE
- 2 Black or African American
- 3 American Indian or Alaska Native → TERMINATE
- 4 Asian → TERMINATE
- 7 or some other race? SPECIFY → TERMINATE
- 9 REFUSED → TERMINATE

S7 [IF HH NOT IN CITY OF CHICAGO] How often do you or other household members drive into Chicago for personal or business reasons on a weekday?

- 0 NEVER/NOT AT ALL
- 1 LESS THAN ONCE A MONTH
- 2 AT LEAST ONCE A MONTH BUT LESS THAN ONCE A WEEK
- 3 1-2 TIMES PER WEEK
- 4 3+ TIMES PER WEEK
- 9 DK/RF

S7a Does anyone in your household make at least 10 trips per day by auto?

- 1 YES
- 2 NO
- 9 DK/RF

S8 Does anyone in your household travel more than 75 miles a day throughout the region as part of their job?

- 1 YES
- 2 NO
- 9 DK/RF

V1 And how many motor vehicles are owned, leased, or available for regular use by the people who currently live in your household? Please be sure to include motorcycles, mopeds, and RVs.
INTERVIEWER NOTE: THE NUMBER OF TRIPS MADE BY A HOUSEHOLD IS OFTEN DIRECTLY RELATED TO THE NUMBER OF VEHICLES.

ENTER NUMBER

98...DON'T KNOW – TERMINATE WITH BELOW TEXT

99...REFUSED – terminate "Thank you but without this information, your household will not be eligible to participate in this study." PAUSE AND GIVE FINAL OPPORTUNITY FOR RESPONDENT TO ANSWER BEFORE TERMINATING

H1. How many people, including yourself, live in your home?

ENTER NUMBER

98...DON'T KNOW – TERMINATE WITH BELOW TEXT

99...REFUSED – terminate "Thank you but without this information, your household will not be eligible to participate in this study." PAUSE AND GIVE FINAL OPPORTUNITY FOR RESPONDENT TO ANSWER BEFORE TERMINATING

NOTE TO INTERVIEWER: INCLUDE IN THIS NUMBER FOSTER CHILDREN, ROOMERS, HOUSEMATES, PEOPLE LIVING HERE MOST OF THE TIME WHILE WORKING, EVEN IF THEY

HAVE ANOTHER PLACE TO LIVE, HOUSEHOLD MEMBERS ON ACTIVE DUTY. **DO NOT INCLUDE** COLLEGE STUDENTS LIVING AWAY WHILE ATTENDING COLLEGE OR PEOPLE WHO LIVE AT ANOTHER PLACE MOST OF THE TIME.

H1a How many of those people depend on you or other household adults to assist them in their daily activities and travel?

ENTER NUMBER

98...DON'T KNOW

99...REFUSED

Thank you. The second part of this study is to understand why, when, and where people travel in the region. To do this, we're asking households to record their travel for a [24-hour/48-hour – there is one program for 24-hour and one for 48-hour, so this isn't a toggle but appropriate text for each program.] period. If you could help us with this study, we'd ask you some questions about your household today to make sure that we're talking to all types of households in the region. Then we ask for some details about each person in your household in order to prepare personalized logs, which we'd mail to you. After you record your local travel and activities for the assigned travel period, we call back to collect your information. Everything asked is for research purposes only and will be held in strict confidence.

S8 Are you interested in helping improve the future of transportation in the Chicago region by tracking your travel for this study?

- 1 AGREE TO PARTICIPATE
- 2 REFUSAL – RECORD VERBATIM REMARKS

VEHICLE ROSTER

ZERO VEHICLE HOUSEHOLDS SKIP TO H2

Start Vehicle Roster

V2-V4 Earlier, you indicated that you had [HHVEH] vehicles. I have a few questions about each of these vehicles. Let's start with the vehicle that is driven the most. What are the make, model and year of this vehicle? INTERVIEWER NOTE: THESE DETAILS ABOUT THE HOUSEHOLD VEHICLES HELP TO MONITOR AIR QUALITY ISSUES.

PROGRAMMING NOTE: SHOW MATRIX ON SCREEN

VEH #	V2=MAKE [CODE]	V3=MODEL [CODE]	V4=YEAR
01			
02			
03			
04			
05			

V5 [IF MAKE OR MODEL IS REFUSED] And is this a/an?

- 1 Car or station wagon?
- 2 Van (ANY TYPE)
- 3 SUV
- 4 Pick-up Truck
- 5 Other kind of truck
- 6 RV
- 7 Motorcycle,
- 97 Or something else (specify)?
- 99 REFUSED

V6 When at home, where is this vehicle typically parked ...

- 1 ON STEET
- 2 OFF STREET -DRIVEWAY
- 3 IN GARAGE
- 7 SOMEPLACE ELSE (specify)
- 8 DON'T KNOW
- 9 REFUSED

This added question (V6) could be added to the matrix shown above.

V7 - Does this vehicle have a working cigarette lighter or power outlet?

- 1 Yes
- 2 No
- 8 DK/RF

HOUSEHOLD ROSTER (PART 1)

H2 How many bicycles does your household own and use on a regular basis?

ENTER NUMBER

8...DON'T KNOW

9...REFUSED

H3 Which best describes your home?

1 One-family house detached from any other house

2 One-family house attached to one or more houses [DUPLEX, ROW HOUSE, TOWNHOUSE]

3 Building with 2 or more apartments [CONDO, APARTMENT, ETC]

7 Or something else? SPECIFY

9 REFUSED

H4 Is your home owned or rented? ADDED BACK IN 1/2/07

1 OWNED/MORTGAGED

2 RENTED

7 OTHER - SPECIFY

9 REFUSED

H5 How long have you lived at this location?

1 Less than 1 year

2 At least 1 year but less than 2 years

3 At least 2 years but less than 5 years

4 At least 5 years but less than 10 years

5 10 or more years

9 REFUSED

IF LIVED AT CURRENT ADDRESS LESS THAN 2 YEARS (H5<3), ASK H6, ELSE SKIP TO H10

H6 Where did you live before this?

CITY, STATE, ZIP

H7 And what type of house was that? ADDED BACK IN 1/2/07

1 One-family house detached from any other house

2 One-family house attached to one or more houses [DUPLEX, ROW HOUSE, TOWNHOUSE]

3 Building with 2 or more apartments [CONDO, APARTMENT, ETC]

7 Or something else? SPECIFY

8 REFUSED

H8 Are you planning to move in the next month?

1 Yes

2 No

H12 Since we are conducting this survey by telephone, I have some questions about the telephones in your household. How many cellular telephone numbers do members of your household have?

_____ 9REFUSED

H13 [IF H12>0: Not counting the cellular phones,] How many home telephone numbers does your household have? This includes only land-lines or those hard wired to your house but excludes cellular phones. THIS INCLUDES DIGITAL PHONE SERVICE

_____ 9 REFUSED

H14 [IF H13>1] How many of these hard-wired telephone numbers, if any, are dedicated to a FAX machine or modem?

_____ 9 REFUSED

H20 And to ensure your household properly represents others in the region, can you tell me if your total household income for 2006 was above or below \$50,000? INTERVIEWER NOTE: HOUSEHOLD INCOME NOT ONLY ALLOWS US TO VERIFY THAT WE ARE INCLUDING ALL TYPES OF HOUSEHOLDS FROM THE REGION, BUT ALSO HAS BEEN FOUND TO BE RELATED TO THE TYPES OF TRIPS HOUSEHOLDS MAKE.

H20a [IF BELOW \$50,000] Is it above or below \$20,000?

If below \$20,000, INCOME=1

[IF AT OR ABOVE \$20,000] Is it above or below \$35,000?

\$20,000 - < \$35,000, INCOME=2

\$35,000 - < \$50,000, INCOME=3

H20b [IF \$50,000 OR ABOVE] Is it above or below \$75,000?

[IF BELOW \$75,000] Is it above or below \$60,000?

IF BELOW \$60,000, INCOME=4

IF \$60,000 OR ABOVE, INCOME=5

[IF \$75k OR ABOVE], Is it above or below \$100,000?

If \$75k to <\$100k, INCOME=6

If \$100k+, INCOME=7

IF REFUSED: I appreciate your concerns about providing this information, but I only need to properly identify your household as belonging to one of the following categories: READ INCOME LIST

- | | |
|---|----------------------|
| 1 | \$0 - \$19,999 |
| 2 | \$20,000 - \$34,999 |
| 3 | \$35,000 - \$49,999 |
| 4 | \$50,000 - \$59,999 |
| 5 | \$60,000 to \$74,999 |
| 6 | \$75,000 to \$99,999 |
| 7 | \$100,000 or more |
| 9 | REFUSED/DK |

PROGRAMMER: COMPUTE INCOME

PERSON ROSTER

Now I need to get some information about each household member. Earlier you indicated that there were <HHSIZ> persons in your household. First I need the names for each person in the household.
[IF HHSIZE=2] What is the first name of the other person living in your home?

[IF HHSIZE>2] Not including yourself, what's the first name of the oldest person?
What's the name of the next oldest person in the household? [EXCLUDING REFERENCE PERSON]
What's the first name of the next oldest person? [EXCLUDING REFERENCE PERSON]

BEGIN SERIES OF QUESTIONS WITH REFERENCE PERSON, THEN COLLECT FOR OTHER HOUSEHOLD MEMBERS. IF UNCOMFORTABLE GIVING CHILDREN'S NAMES, OKAY TO USE "CHILD #1, CHILD #2," ETC OR INITIALS

P1 What is this person's gender? [RECORD BY OBSERVATION FOR RESPONDENT]

- 1 MALE
- 2 FEMALE
- 9 REFUSED

P2 What is this person's age?
_____ [enter in years]

- 98 98 or older
- 99 DON'T KNOW/ REFUSED

P3 IF AGE = DK/RF: Many of our questions about this person are based on his/her age. Can you tell me if NAME is at least 16 years of age?

- 1 UNDER 16
- 2 AGE 16+
- 9 DK/RF

P4 Are you Hispanic or Latino? [ASK FOR REFERENCE PERSON ONLY]

- 1 YES
- 2 NO
- 9 REFUSED

P5 And what is your race? [ASK FOR REFERENCE PERSON ONLY]

INTERVIEWER NOTE: IF YES TO P4, PREFACE QUESTION WITH "IN ADDITION TO BEING HISPANIC, LATINO OR SPANISH," ...

- 1 White
- 5 Black or African American
- 6 American Indian or Alaska Native
- 7 Asian
- 7 or some other race? SPECIFY
- 9 REFUSED

P6 Does NAME have any type of disability that affects your ability to travel?

- 1 YES
- 2 NO
- 1 DK/RF

- P7 IF YES: What type of disability is that?
- 1 LIMITED MOBILITY (WHEELCHAIR, CANE/WALKER)
 - 2 BLIND/VISUAL
 - 3 DEAF/HEARING IMPAIRED
 - 4 MENTALLY DISABLED
 - 7 OTHER (SPECIFY)
 - 8 DON'T KNOW
 - 9 REFUSED

P7a [IF P6=YES] To what extent does/do he/she/you require assistance when he/she/you travel? Would you say its ...

- 1 Not at all?
- 2 For a portion of each trip?
- 3 For the entire trip?
- 9 DK/RF

P7b [IF P6=YES] And does this person have any of the following? MULTIPLE RESPONSE

- 1 a disabled license plate or mirror hangtag
- 2 A registration to use special transit services for persons with disability
- 3 NONE OF THE ABOVE
- 7 OTHER (SPECIFY)
- 9 DK/RF

PROGRAMMER NOTE: IF UNDER AGE 16, SKIP TO P13

P8 Does NAME have a valid driver's license?

- 1 YES
- 2 NO
- 9 DK/RF

P9 Are you employed, either full-time or part-time?

- 1 EMPLOYED FULL-TIME (30+ HOURS/WEEK)
- 2 EMPLOYED PART-TIME (<30 HOURS /WEEK)
- 3 NOT EMPLOYED
- 8 DK/RF

P9a In the last week, how many trips were made by: Biking?

- 0 None

P10 [IF P9>2] Does NAME do any type of volunteer work on a regular basis?

- 1 YES – TREAT AS EMPLOYED
- 2 NO
- 9 DK/RF

P11 [IF P9>2 AND P10>1] Which of the following best describes NAME's status?

- 1 Retired,
- 2 Temporarily Disabled / On Disability Status [TEMPORARILY NOT WORKING]
- 3 Permanently Disabled [PERMANENTLY NOT WORKING]
- 4 Homemaker,
- 5 Unemployed but looking for work,
- 6 Unemployed and not looking for work, or
- 7 a Student?
- 97 OTHER (specify)
- 99 REFUSED

**Work-Related Data - Age 16 and older AND P9<3 OR P10=1
(REST SKIP TO SCHOOL SECTION)**

If P10=1 read:

For this next series of questions, please answer them based on NAME's volunteer position.

W1 How many jobs does NAME have? Please include all paid and volunteer positions that he/she works on a regular basis.

_____ # Jobs (MUST BE AT LEAST ONE. CANNOT BE DK/RF)

IF MORE THAN ONE JOB: For this next series of questions, please consider only NAME's primary job. INTERVIEWER NOTE: THIS IS DEFINED AS THE ONE WHERE THEY WORK THE MOST HOURS. IF WORK EQUAL HOURS, IT IS THE JOB THEY HAVE HELD THE LONGEST

W2. What is your/his/her occupation? (IF ~~JOB TITLE~~ UNKNOWN, What kind of work does this person do?] VERBATIM

W3 I'm going to read a list of different industries. Please tell me which one best describes this person's employer:

- 1 Manufacturing
- 2 Transportation, , utilities, or warehousing
- 3 Communications (MADE ITS OWN CHOICE CODE)
- 4 Retail
- 5 Service
- 6 Government, or
- 7 Other (specify)

IF W3=5 ask, "Is that ..."

- 1 Finance and insurance
- 2 Real estate, rental or leasing
- 3 Professional, scientific, or technical services
- 4 Management of companies or enterprises
- 5 Administrative support, waste management or remediation services
- 6 Educational services
- 7 Health care or social assistance
- 8 Arts, entertainment or recreation
- 9 Accomodation or food services
- 97 Or other services (specify)

W4 We're interested in [workplace/volunteer] locations because travel to [work/volunteer] activity often affects other daily activities and travel. What is the name of this person's [employer/volunteer location]? IF SELF-EMPLOYED, OBTAIN NAME OF BUSINESS

- 1 SELF-EMPLOYED (SPECIFY BUSINESS / COMPANY NAME) – "HOME" not allowed
- 7 OTHER (SPECIFY BUSINESS / COMPANY NAME) – ALLOW FOR LOOK-UP TABLE
- 9 DK/RF

W5 At what location does this person normally [work/volunteer]?

INTERVIEWER NOTE: IF THIS PERSON WORKED AT MORE THAN ONE LOCATION, OBTAIN WHERE HE OR SHE WORKED MOST (MAIN JOB).

IF WORKS BOTH AT HOME AND OUTSIDE HOME, GET NON-HOME ADDRESS

IF NEEDED: WE ARE NOT GOING TO CONTACT YOU THERE. WE'RE INTERESTED IN WORKPLACE LOCATIONS BECAUSE TRAVEL TO WORK OFTEN AFFECTS OTHER DAILY TRAVEL.

IF VARIES, OBTAIN ADDRESS FOR LOCATION WORKED AT LAST WEEK

- 1 HOME
- 2 ADDRESS GIVEN – ENTER BELOW
- 3 VARIES – ENTER MOST RECENT LOCATION BELOW
- 4 NO SET WORK LOCATION – ENTER WHERE WORKED LAST WEEK
- 8 DON'T KNOW
- 9 REFUSED

ENTER THE ADDRESS OF THIS PERSON'S WORKPLACE (CANNOT ENTER 'VARIES')

PROGRAMMER NOTE: THIS SHOULD ALL BE COLLECTED ON SAME SCREEN,
ADDR: what is the street address of that place? (ADDRESS, CITY, STATE, ZIP)

[ASK THIS ONLY IF THE ADDRESS DOESN'T GEOCODE ON SCREEN] MAJOR

INTERSECTION: What is the nearest major intersection to that place?

[ASK THIS ONLY IF THE ADDRESS DOESN'T GEOCODE ON SCREEN] REFERENCE

POINT: And is there a nearby business or place of interest to help us locate it on a map?

W6 How many days a week do you typically go to work at this address?

ANSWER 1 to 7

W7 [IF W5>1] How does this person normally get to work/their volunteer activity? IF NEEDED: THAT IS, THE ONE USED FOR MOST OF THE DISTANCE.

- 1 WALK
- 2 BIKE
- 3 AUTO / VAN/ TRUCK DRIVER
- 4 AUTO / VAN / TRUCK PASSENGER
- 5 CTA BUS
- 6 CTA TRAIN
- 7 PACE BUS
- 8 METRA TRAIN/SOUTH SHORE RAILROAD
- 9 PRIVATE SHUTTLE BUS
- 10 DIAL-A-RIDE/PARATRANSIT
- 12 TAXI
- 14 LOCAL TRANSIT (INDIANA ONLY)
- 97 OTHER (SPECIFY)
- 98 DON'T KNOW
- 99 REFUSED

W8 Does NAME's job require you/him/her to have a personal vehicle available while at work?

- 1 YES
- 2 NO
- 9 DK/RF

W9 [IF W5>1] Does NAME's employer allow him/her to work from home for pay on a regular basis?

This would be in place of driving to a regular work location, something that is commonly referred to as "telework."

- 1 YES
- 2 NO
- 8 DON'T KNOW
- 9 REFUSED

W10 [IF W9=1]About how often do you/does NAME work at home instead of traveling to your/his/her usual workplace? Would you say:

- 1 Almost every day,
- 2 Once a week or more,
- 3 One a month or more
- 4 A few times a year, or
- 5 Once a year
- 8 DK
- 9 REFUSED

W11 Which of the following statements best describes your work schedule?

- 1 I have no flexibility in my work schedule
- 2 I have some flexibility in my work schedule
- 3 I'm pretty much free to adjust my schedule as I like
- 9 DK/RF

School-Related Data – Ask of all HH members

C1 What is the highest degree or level of school you've completed?

- 1 Not a high school graduate, 12 grade or less (THIS INCLUDES VERY YOUNG CHILDREN TOO)
- 2 High school graduate (high school diploma or GED)
- 3 Some college credit but no degree
- 4 Associate or technical school degree
- 5 Bachelor's or undergraduate degree
- 6 Graduate degree (includes professional degree like MD, DDs, JD)
- 7 OTHER, SPECIFY
- 9 DK/RF

C2 Is this person currently enrolled in any type of school, including [if age<6 daycare], technical school, or university? IF AGE 18+, FOLLOW UP WITH: IS THAT FULL-TIME OR PART-TIME?

- 1 YES – FULL TIME
- 2 YES – PART TIME
- 3 NO – GO TO NEXT SECTION
- 9 DK/RF– GO TO NEXT SECTION

C3 What school grade or level does this person attend?

- 1 DAYCARE
- 2 NURSERY SCHOOL, PRE-SCHOOL
- 3 KINDERGARTEN TO GRADE 8
- 4 GRADE 9 TO 12
- 5 TECHNICAL/VOCATION SCHOOL
- 6 2-YEAR COLLEGE (COMMUNITY COLLEGE)
- 7 4-YEAR COLLEGE OR UNIVERSITY
- 8 GRADUATE SCHOOL/PROFESSIONAL
- 97 OTHER, SPECIFY
- 99 DK/RF

C4 What is the name of that school? LOOK UP LIST.

C5 Where is it located?

- 1 HOME
- 2 ADDRESS OBTAINED – OBTAIN NAME FIRST
- 9 DK/RF

C6 ENTER THE STREET ADDRESS OF THIS PERSON'S SCHOOL – ALL ON ONE SCREEN (IF FROM LOOK-UP LIST, CONFIRM ADDRESS)

Address _____

City _____

State _____

ZIP: _____

C7 How does this person normally get to school? IF NEEDED: THAT IS, THE ONE USED FOR MOST OF THE DISTANCE. SKIP IF S6=1

- 1 WALK
- 2 BIKE
- 3 AUTO / VAN/ TRUCK DRIVER
- 4 AUTO / VAN / TRUCK PASSENGER
- 5 CTA BUS
- 6 CTA TRAIN
- 7 PACE BUS
- 8 METRA TRAIN/SOUTHSHORE RAILROAD
- 9 PRIVATE SHUTTLE BUS
- 10 DIAL-A-RIDE/PARATRANSIT
- 11 SCHOOL BUS
- 12 TAXI
- 97 OTHER (SPECIFY)
- 98 DON'T KNOW
- 99 REFUSED

HOUSEHOLD ROSTER PART 2

D1 Understanding your household's travel and activities is very important for improving transportation in your area. We will send you a log for each member of your household to keep track of your [travel and activities for [24-hours/48-hours – will vary for each program but is not a merge field] on [DAYS AND DATES].

[IF INCENT=1: In appreciation of your households participation, we will be sending you \$10 for each household member with the travel logs.]

INCENT=1 if Race=2, 3, or 4; OR Hispanic=1, OR INCOME<\$25,000

Is this okay?

1 Yes

2 No – Well, lets try a different time. How about [ALT DAY AND DATE].

ENTER ASSIGNMENT NUMBER

2007 Master Travel Schedule – no blackout dates

D1a In what language would you like to receive your study materials?

1 English

2 Spanish

D2 To whom should we address the envelope?

FIRST NAME

LAST NAME

9 REFUSED --> INDICATE THAT INFORMATION IS NECESSARY, IF STILL REFUSE, TERMINATE

D3 In order to mail the logs to you, I need your address. [IF LISTED SAMPLE, CONFIRM ADDRESS, IF UNLISTED: OBTAIN

MAILING ADDRESS HERE

D4 Is this also where you live? IF NOT, OBTAIN PHYSICAL ADDRESS

D5 We will mail the logs to you in a few days and will call you again on [REMIND DATE] to make sure you have received the packet and to answer any questions. Then we will call to ask about your [travel and activities] on [BEGDATE]. When would be the best time to reach you?

1 Morning

2 Afternoon

3 Evening

D6 And should we call you at this telephone number or is there a different phone number where you would prefer to be called?

1 This number

2 Different number ___ - ___ - ____

D7 When we call back to collect your [travel and activities]/[activities], we will not ask to speak to anyone under 16 years old, but we would like to ask about their travel. Who would be the best person to give that information? ENTER PERSON NUMBER.

GPS Request

- If (1) totveh>0 AND
(2) 1st 3 vehicles all have functioning cigarette lighters AND
(3A) S7new=1 YES OR
(3B) S8=1

G1 – DOGPS

In addition to asking everyone to record their travel information in the travel log, we're selecting a handful of households to help test the use of Global Positioning System, or GPS, technology, in conducting travel surveys. If selected, we would contact you and mail GPS devices to you for each person in your household of age 16 or older. All you would need to do is plug the device into your car's cigarette lighter or power outlet. Once you plug it in, there's nothing else to do except leave it there for one week. The process is very simple and the results of this test can lead to improved travel studies in the future. If selected, will you help us with the GPS test?

- 1 YES
- 2 NO – GO TO THANK

G2 – DTPHN

May I have a **daytime** phone number where I can reach you if your household is selected to participate in the GPS portion of the project?

- 1 This number
- 2 Different number ___ - ___ - ____

IF G2 = 2

G3 - DTPHT

Is This number is your

- 1 Work number
- 2 Cell phone number
- 3 Other (specify)

G4 Is ASSN a day when [IF S7=4 – someone in your household will be traveling into Chicago for work or personal reasons OR IF S8=1 someone in your household is driving for business purposes?]

- 1 YES
- 2 NO – ASSIGN NEW TRAVEL DAY TO CAPTURE THIS BEHAVIOR

CONCLUSION

Thank you for participating in the Travel Tracker Survey. Please tell the other members of your household how important their participation is for the success of the study. We look forward to talking with you again. If you have any questions or comments, you can reach us at 1-877-261-4621. Thank you and have a good day/night.